XYZ VALLEY HOME HEALTH GENERAL SKILLS COMPETENCY CHECKLIST

USE: This form is for the new hire and is used throughout the orientation process to document competencies covered. It is also used for the preceptor to help give insight as to the current competency of the orientee and competency needs of the orientee. After completion, a copy is kept in the orientee's personnel file.

COMPETENCY	SCORING:
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(Preceptor completes)

- 1 Does not meet standard
- 2 Improvement needed
- 3 Meets standard fully
- 4 Exceeds standard

EXPERIENCE: (Orientee completes)

1 – None

- 2 Some
- 3 Competent

4 – Expert

XX – Denotes subject does not need to be demonstrated due to broad scope of subject. Any subject that has an "XX" must have an experience rating of 3-4 or automatically requires preceptor supervision until competency is demonstrated.

Note: After review of experience ratings, the preceptor may decide if "demonstration is required" and check the box. Some items are prechecked.

		SUPER	DEMO	DEMO DATE/	PRECEPTOR	
COMPETENCY	EXPER	REQ'D	REQ'D	SCORE	INITIALS	COMMENTS
A. OFFICE						
Computer function						
[HHA's Software]						
Word						
Excel						
Keyboarding						
[Other]						
Voice mail						
Phone use						
Communications						
Mail						
Fax machine						
Copy machine						
Misc equipment						
Supplies/ordering						
Referral process						
Admission process						
Policies & procedures						

			DEMO	DEMO	DDEAEDTAD	
COMPETENCY	EXPER	SUPER REQ'D	DEMO REQ'D	DATE/ SCORE	PRECEPTOR INITIALS	COMMENTS
A. OFFICE Cont'd						
Daily activity record						
Filing						
Records mgmt						
B. HOME CARE						
SYSTEM						
ORGANIZATION						
Mission/Vision/Goals						
Scope & service area						
Agency brochure						
Job description						
Organizational chart						
Complaints/grievances						
[CHAP]						
Rights & Responsibilitie	S					
Advance Directives						

C. SAFETY AND SECURITY

Emergency preparedness
Office safety/fire prevention
Security
Unsafe situations
Equipment mgmt
Home safety
Storing/handling/
Accessing supplies
Inclement weather
Vehicle accidents
Personal safety
Maps and local areas

				DEMO			
		SUPER	DEMO	DATE/	PRECEPTOR		
COMPETENCY	EXPER	REQ'D	REQ'D	SCORE	INITIALS	COMMENTS	

D. INFECTION CONTROL

Universal precautions
Equipment mgmt
Identfying/handling/
Disposing hazardous/
Infectious wastes
Sharps disposal
TB precautions
Personal hygiene
Aseptic procedures
Communicable infections
Reportable illnesses

E. CLINICAL RECORDS MANAGEMENT

Confidentiality
Data Map/Referrals
Admission process
Documentation/forms
Data map/referral
Physician orders
Consent
Rights & Respon
Advance Directives
Patient Handbook
Assessment/OASIS
Nutritional Assess
Safety Assess
Commun log
Visit notes
Instructions/teaching
IDT
Reassess/OASIS
Discharge/OASIS
OASIS – other

				DEMO		
		SUPER	DEMO	DATE/	PRECEPTOR	
COMPETENCY	EXPER	REQ'D	REQ'D	SCORE	INITIALS	COMMENTS

F. RESOURCES AND UTILIZATION

Personnel records
Office Resources
Community Resources
Staff meetings
Committee meetings
Time management/scheduling
Performance Improvement

G. PROFESSIONAL COMMUNICATIONS

Constructive critique
Irate people
Active listening
Complaints
Client
Co-workers
Give/receive feedback
Professional appearance
Problem solving
Other
Other
Other
Other